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FEC FORM 3Y

REPORT OF RECEIPTS AND DISBURSEMENTS

| FORIWI SX F | or Other Than An | Authorized C | Committe | e | | Office Use Only | |
|---|----------------------------|----------------------|----------------------------|--------------------|----------------|----------------------|---|
| 1. NAME OF COMMITTEE (in full) | TYPE OR PRINT ▼ | | ole: If typin ne lines. | g, type | 12FE4M5 | | |
| Cool PAC | | | | | | | |
| | | | | | | | |
| ADDRESS (number and street) | 610 S. Boulevard | | | | | | |
| Check if different | | | | | | | |
| than previously reported. (ACC) | Tampa | | | | FL L | 33606 | |
| 2. FEC IDENTIFICATION NU | MBER ▼ | CITY 🛦 | | S | TATE 🛦 | ZIP CO | DE 🛦 |
| C C00525592 | | 3. IS THIS REPORT | × (N | EW N) OR | AM (A) | ENDED | |
| 4. TYPE OF REPORT (Choose One) | (b) Monthly Report Due On: | Feb 20 (M2) | M | 1ay 20 (M5) | Aug | 20 (M8) | Nov 20 (M11) (Non-Election Year Only) |
| (a) Quarterly Reports: | | Mar 20 (M3) | J | un 20 (M6) | Sep | 20 (M9) | Dec 20 (M12) (Non-Election Year Only) |
| April 15 | | Apr 20 (M4) | J | ul 20 (M7) | Oct 2 | 20 (M10) | Jan 31 (YE) |
| Quarterly Report (Q July 15 | (c) 12-Day | | imary (12P) | | General (| 12G) | Runoff (12R) |
| Quarterly Report (Q: October 15 | Report for the | ne: Co | onvention (1 | 2C) | Special (| 12S) | |
| Quarterly Report (Q: January 31 Year-End Report (YI | _ | lection on | M = M / | D D / | Y Y Y | in the State o | f |
| July 31 Mid-Year Report (Non-election Year Only) (MY) | (d) 30-Day | on Ge | eneral (30G |) | Runoff (3 | 0R) | Special (30S) |
| Termination Report | Report for the | ne: | M M / | | V V V V | in the | |
| (TER) | E | lection on | W - W / | | | in the State o | f |
| 5. Covering Period 01 | | 015 | through | M M M | / D D / | 2015 | |
| I certify that I have examined thi | s Report and to the be | st of my knowle | edge and b | elief it is true | e, correct and | I complete. | |
| Type or Print Name of Treasurer | Nancy Watkins | | | | | | |
| Signature of Treasurer Nancy | Watkins | [E | lectronically | Filed] Da | ate 07 | / 09 / | 2015 |
| NOTE: Submission of false, errone | ous, or incomplete inforr | mation may subje | ect the pers | on signing thi | s Report to th | e penalties of 2 l | J.S.C. §437g. |
| Office Use Only | | | | | | FEC FOR Rev. 12/2 | |

SUMMARY PAGE OF RECEIPTS AND DISRUBSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Cool PAC 2015 06 30 2015 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 25868.20 January 1, 2015 (b) Cash on Hand at 25868.20 Beginning of Reporting Period..... 10000.00 10000.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 35868.20 35868.20 6(a) and 6(c) for Column B)..... 30500.00 30500.00 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 5368.20 5368.20 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

| \sim . | | Λ. | \sim |
|--------------|----------------|---------------|--------|
| Cool | $\mathbf{\nu}$ | Δ | |
| \mathbf{c} | | $\overline{}$ | v |

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date | | |
|---|-------------------------------|-----------------------------------|--|--|
| Contributions (other than loans) From: | | | | |
| (a) Individuals/Persons Other | | | | |
| Than Political Committees | | | | |
| (i) Itemized (use Schedule A) | 10000.00 | 10000.00 | | |
| (ii) Haitomiand | 0.00 | 0.00 | | |
| (ii) Unitemized(iii) TOTAL (add | | 0.00 | | |
| Lines 11(a)(i) and (ii) | ▶ 10000.00 | 10000.00 | | |
| | 0.00 | 0.00 | | |
| (b) Political Party Committees(c) Other Political Committees | | 0.00 | | |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 | | |
| (d) Total Contributions (add Lines | | 7 | | |
| 11(a)(iii), (b), and (c)) (Carry | | | | |
| Totals to Line 33, page 5) | ▶ 10000.00 | 10000.00 | | |
| 2. Transfers From Affiliated/Other | | | | |
| Party Committees | 0.00 | 0.00 | | |
| | 0.00 | 0.00 | | |
| . All Loans Received | | 0.00 | | |
| Loan Repayments Received | 0.00 | 0.00 | | |
| 5. Offsets To Operating Expenditures | | 0.00 | | |
| (Refunds, Rebates, etc.) | | | | |
| (Carry Totals to Line 37, page 5) | 0.00 | 0.00 | | |
| 6. Refunds of Contributions Made | | | | |
| to Federal Candidates and Other | | | | |
| Political Committees | 0.00 | 0.00 | | |
| 7. Other Federal Receipts | 7 | | | |
| (Dividends, Interest, etc.) | 0.00 | 0.00 | | |
| . Transfers from Non-Federal and Levin | Funds | 7 | | |
| (a) Non-Federal Account | | | | |
| (from Schedule H3) | 0.00 | 0.00 | | |
| | | | | |
| (b) Levin Funds (from Schedule H5) | | 0.00 | | |
| (c) Total Transfers (add 18(a) and 18(l | 0.00 | 0.00 | | |
| (c) Total Transfers (add To(a) and To(| 5)) | 0.00 | | |
| . Total Receipts (add Lines 11(d), | | | | |
| 12, 13, 14, 15, 16, 17, and 18(c)) | ▶ 10000.00 | 10000.00 | | |
| . Total Federal Receipts | | | | |
| (subtract Line 18(c) from Line 19) | ▶ 10000.00 | 10000.00 | | |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date | | |
|--|----------------------------|-----------------------------------|--|--|
| . Operating Expenditures: —— (a) Allocated Federal/Non-Federal | | Calolidai ical-to-Date | | |
| Activity (from Schedule H4) | | | | |
| (i) Federal Share | 0.00 | 0.00 | | |
| (ii) N 5 1 101 | 0.00 | 0.00 | | |
| (ii) Non-Federal Share(b) Other Federal Operating | 0.00 | 0.00 | | |
| Expenditures | 2500.00 | 2500.00 | | |
| (c) Total Operating Expenditures | | | | |
| (add 21(a)(i), (a)(ii), and (b))▶ | 2500.00 | 2500.00 | | |
| Transfers to Affiliated/Other Party | | 0.00 | | |
| Contributions to | 0.00 | 0.00 | | |
| Federal Candidates/Committees and Other Political Committees | 28000.00 | 28000.00 | | |
| Independent Expenditures | 0.00 | 0.00 | | |
| (use Schedule E) Coordinated Party Expenditures | 7 | 0.00 | | |
| (2 U.S.C. §441a(d)) (use Schedule F) | 0.00 | 0.00 | | |
| Loan Repayments Made | 0.00 | 0.00 | | |
| Loans Made | 0.00 | 0.00 | | |
| Refunds of Contributions To: | | | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 | | |
| - | | | | |
| (b) Political Party Committees | 0.00 | 0.00 | | |
| (c) Other Political Committees | 0.00 | 0.00 | | |
| (such as PACs) | 0.00 | 0.00 | | |
| (d) Total Contribution Refunds | | | | |
| (add Lines 28(a), (b), and (c))▶ | 0.00 | 0.00 | | |
| | | | | |
| Other Disbursements | 0.00 | 0.00 | | |
| Federal Election Activity (2 U.S.C. §431(20)) | | | | |
| (a) Allocated Federal Election Activity | | | | |
| (from Schedule H6) | | | | |
| (i) Federal Share | 0.00 | 0.00 | | |
| (**) W W Q ! | 0.00 | 0.00 | | |
| (ii) "Levin" Share | 0.00 | 0.00 | | |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 | | |
| (c) Total Federal Election Activity (add | | | | |
| Lines 30(a)(i), 30(a)(ii) and 30(b))▶ | 0.00 | 0.00 | | |
| THE BUILDING AND A STATE OF THE | | | | |
| Total Disbursements (add Lines 21(c), 22, | 20500.00 | 0000000 | | |
| 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | 30500.00 | 30500.00 | | |
| Total Federal Disbursements | | | | |
| (subtract Line 21(a)(ii) and Line 30(a)(ii) | | | | |
| from Line 31) | 30500.00 | 30500.00 | | |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 3. Total Contributions (other than loans) (from Line 11(d), page 3) | 10000.00 | 10000.00 |
| 4. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 5. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 10000.00 | 10000.00 |
| i. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 2500.00 | 2500.00 |
| Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| . Net Operating Expenditures (subtract Line 37 from Line 36) | 2500.00 | 2500.00 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 6 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Cool PAC Full Name (Last, First, Middle Initial) Kathleen S. Lee Date of Receipt Mailing Address 1530 Waterwitch Drive 2015 02 25 City State Zip Code Transaction ID: SA11AI.4247 FL Orlando 32806 Amount of Each Receipt this Period FEC ID number of contributing C 5000.00 federal political committee. Name of Employer Occupation Lee Vista Center vice-president Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Richard T. Lee Date of Receipt Mailing Address P. O. Box 2113 02 25 2015 City State Zip Code Transaction ID: SA11AI.4246 FL Orlando 32802 Amount of Each Receipt this Period FEC ID number of contributing C 5000.00 federal political committee. Name of Employer Occupation Lee Vista Center owner Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 10000.00 SUBTOTAL of Receipts This Page (optional)..... 10000.00 TOTAL This Period (last page this line number only).....

| TEMIZED DICDLIDGEMENTS | lloo | *ata aab = -!! = / - \ | FOR LINE | | PAGE 7 OF 9 |
|---|-------------------------------------|---|--------------------|-------------------|--|
| ITEMIZED DISBURSEMENTS | for each of | rate schedule(s) category of the Summary Page | (check only 21b 27 | one) 22 28a | 23 24 25 26 28b 28c 29 36 |
| Any information copied from such Reports and Staten | | | | | |
| or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Cool PAC | ie anu addro | ess or any politic | ai committee to | SOUCH COUL | indutions from Such committee. |
| Full Name (Last, First, Middle Initial) | | | | Data of I | D'alama and |
| A. Robert Watkins & Company. P.A. | | | | Date of L | Disbursement |
| Mailing Address 610 S. Boulevard | | | | 02 | 13 2015 |
| , | State | Zip Code | | Transa | ction ID : SB21B.4244 |
| Tampa Purpose of Disbursement | FL | 33606 | | mansa | CHOILID . ODZ ID. 7277 |
| accounting services | | | | Amount of | of Each Disbursement this Period |
| Candidate Name | | | Category/ Type | | 500.00 |
| President | nent For: Primary Other (spec | General ify) ▼ | 1,500 | | 7 |
| State: District: | | | | | |
| Full Name (Last, First, Middle Initial) B. Robert Watkins & Company. P.A. | | | | Date of I | Disbursement |
| Mailing Address 610 S. Boulevard | | | | 03 | 10 2015 |
| City S Tampa | State FL | Zip Code 33606 | | Transa | ction ID : SB21B.4251 |
| Purpose of Disbursement accounting services | | | · · · · · | Amount of | of Each Disbursement this Period |
| Candidate Name | | | Category/ Type | | 1500.00 |
| | nent For: Primary Other (spec | General | | | |
| | | | | | |
| Full Name (Last, First, Middle Initial) C. Robert Watkins & Company. P.A. | | | | | Disbursement |
| Full Name (Last, First, Middle Initial) C. Robert Watkins & Company. P.A. Mailing Address 610 S. Boulevard | | | | Date of I | Disbursement / 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| C. Robert Watkins & Company. P.A. Mailing Address 610 S. Boulevard City Tampa | State FL | Zip Code 33606 | | 05 | / D D / Y Y Y Y |
| C. Robert Watkins & Company. P.A. Mailing Address 610 S. Boulevard City Tampa Purpose of Disbursement | | | | M M M 05 | 06 2015 ction ID : SB21B.4259 |
| C. Robert Watkins & Company. P.A. Mailing Address 610 S. Boulevard City Tampa | | | Category/ | M M M 05 | 06 / 2015 |
| City Tampa Purpose of Disbursement accounting services Candidate Name Disbursement Disbursement Disbursement Disbursement Disbursement Disbursement Disbursement Disbursement Disbursement | FL | 33606 General | Category/ Type | M M M 05 | ction ID : SB21B.4259 of Each Disbursement this Period |
| C. Robert Watkins & Company. P.A. Mailing Address 610 S. Boulevard City S. Tampa Purpose of Disbursement accounting services Candidate Name Office Sought: House Senate President | nent For: Primary Other (spec | 33606 General | Type | M M M 05 | ction ID : SB21B.4259 of Each Disbursement this Period |

| SCHEDULE B (FEC Form 3X) | | | FOR LINE | NUMBER: | | PAGE | 8 C |)F 9 |
|--|------------------------------------|---------------------------------------|-------------------|-----------|-------------|-----------------|-----------|---------------|
| ITEMIZED DISBURSEMENTS | | parate schedule(s) category of the | (orlean orling | | N 00 | | ¬ | |
| | | Summary Page | 21b 27 | 22 28a | 23 28b | 24 28c | 25 29 | 30 |
| Any information copied from such Reports and Stater or for commercial purposes, other than using the nan | | | | | | | | |
| NAME OF COMMITTEE (In Full) | | Ponti | | | | , GGO II | | |
| Cool PAC | | | | | | | | |
| Full Name (Last First Middle Initial) | | | | | | | | |
| Full Name (Last, First, Middle Initial) A. Rodney Leland Blum | | | | Date of | Disburser | ment | | |
| Mailing Address 11361 Oakland Farms Road | | | | 03 | / D 25 | | 2015 | Y |
| | State | Zip Code | | | | | | |
| Dubuque | IA | 52003 | | Trans | action ID | : SB23.4257 | 7 | |
| Purpose of Disbursement contribution | | | <u> </u> | Amount | of Each I | Disburseme | nt this F | eriod |
| Candidate Name | | | Category/ | | | | 10- | 00 |
| Rodney Leland Blum | | | Type | | | | 1000 | .00 |
| | ment For: Primary Other (spe | General | | | | | | |
| State: IA District: 01 | | <i>-,</i> ▼ | | _ | _ | | | _ |
| Full Name (Last, First, Middle Initial) | | | | | | | | |
| B. Kansans for Huelskamp | | | | Date of | Disburser | | Y = Y = | Υ |
| Mailing Address P. O. Box 410 | | | | 03 | 25 | | 2015 | |
| City Fowler | State KS | Zip Code 67844 | | Trans | action ID | : SB23.425 | 6 | |
| Purpose of Disbursement contribution | | | · · · · | Amount | of Each | Disburseme | nt this F | eriod |
| Candidate Name | | | Category/ | | | | | _ |
| Timothy A. Huelskamp | | | Type | | | | 1000 | .00 |
| Senate President | ment For: Primary Other (spe | General | | | | | | |
| State: KS District: 01 Full Name (Last, First, Middle Initial) | | | | | | | | |
| C. National Republican Congressiona | al Comn | nittee | | Date of | Disburser | | Y | Y |
| Mailing Address 320 First Street, S.E. | | | | 02 | 26 | | 2015 | |
| , | State DC | Zip Code | | Trans | action ID | : SB23.4250 |) | |
| Washington Purpose of Disbursement | DO | 20003 | | | | | | |
| contribution | | | | Amount | of Each I | Disburseme | nt this F | eriod |
| Candidate Name | | | Category/ Type | | | | 20000 | .00 |
| Senate President | ment For: Primary Other (spe | General ecify) ▼ | | | - 7 | | /#l) | |
| State: District: | | | | | | | | |
| SUBTOTAL of Disbursements This Page (optional) | | | | | | | 22000. | .00 |
| | | | | | | | | \Rightarrow |
| TOTAL This Period (last page this line number only) |) | | | | | | | |

| SCHEDULE B (FEC Form 3X) | | FOR LINE I | NUMBER: PAGE 9 OF 9 |
|--|--|-------------------|--|
| ITEMIZED DISBURSEMENTS | Use separate schedule(s) | (check only | |
| | for each category of the Detailed Summary Page | 21b | 22 🗶 23 24 25 26 |
| | Botanoa Garrinary Fago | 27 | 28a 28b 28c 29 30l |
| Any information copied from such Reports and State | | | |
| or for commercial purposes, other than using the na | me and address of any politic | cal committee to | solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) | | | |
| Cool PAC | | | |
| / | | | |
| Full Name (Last, First, Middle Initial) | _ | | |
| A. National Republican Congression | al Committee | | Date of Disbursement |
| | | | M M / D D / Y Y Y Y |
| Mailing Address 320 First Street, S.E. | | | 03 30 2015 |
| City | State Zip Code | | |
| Washington | DC 20003 | | Transaction ID: SB23.4258 |
| Purpose of Disbursement | 20000 | | |
| contribution | | | Amount of Each Disbursement this Period |
| Candidate Name | | Onto no my/ | |
| | | Category/ Type | 5000.00 |
| Office Sought: House Disburse | ement For: | .,,,,, | , |
| Senate | Primary General | | |
| President | Other (specify) | | |
| State: District: | | | |
| Full Name (Last, First, Middle Initial) | | | |
| B. Stutzman for Senate | | | Date of Disbursement |
| Ctateman for Conate | | | M M / D D / Y Y Y Y |
| Mailing Address P. O. Box 129 | | | 06 11 2015 |
| | | | |
| City | State Zip Code | | Transaction ID : SB23.4260 |
| | | 1 | 1141154C11011 ID . 3D23.4200 |
| Howe | IN 46746 | | Transaction ID . 3B23.4200 |
| Howe Purpose of Disbursement | | | |
| Howe Purpose of Disbursement contribution | | | Amount of Each Disbursement this Period |
| Howe Purpose of Disbursement contribution Candidate Name | | Category/ | |
| Howe Purpose of Disbursement contribution Candidate Name Marlin A. Stutzman | IN 46746 | Category/ Type | Amount of Each Disbursement this Period |
| Howe Purpose of Disbursement contribution Candidate Name Marlin A. Stutzman Office Sought: House Disburse | IN 46746 ement For: 2016 | | Amount of Each Disbursement this Period |
| Howe Purpose of Disbursement contribution Candidate Name Marlin A. Stutzman Office Sought: House Senate | ement For: 2016 Primary General | | Amount of Each Disbursement this Period |
| Howe Purpose of Disbursement contribution Candidate Name Marlin A. Stutzman Office Sought: House Senate President President | IN 46746 ement For: 2016 | | Amount of Each Disbursement this Period |
| Howe Purpose of Disbursement contribution Candidate Name Marlin A. Stutzman Office Sought: House Senate President State: IN District: | ement For: 2016 Primary General | | Amount of Each Disbursement this Period |
| Howe Purpose of Disbursement contribution Candidate Name Marlin A. Stutzman Office Sought: House Senate President President | ement For: 2016 Primary General | | Amount of Each Disbursement this Period |
| Howe Purpose of Disbursement contribution Candidate Name Marlin A. Stutzman Office Sought: House Senate President State: IN District: | ement For: 2016 Primary General | | Amount of Each Disbursement this Period 1000.00 Date of Disbursement |
| Howe Purpose of Disbursement contribution Candidate Name Marlin A. Stutzman Office Sought: House Senate President State: IN District: | ement For: 2016 Primary General | | Amount of Each Disbursement this Period 1000.00 |
| Howe Purpose of Disbursement contribution Candidate Name Marlin A. Stutzman Office Sought: House Senate President State: IN District: Full Name (Last, First, Middle Initial) C. | ement For: 2016 Primary General | | Amount of Each Disbursement this Period 1000.00 Date of Disbursement |
| Howe Purpose of Disbursement contribution Candidate Name Marlin A. Stutzman Office Sought: House Senate President State: IN District: Full Name (Last, First, Middle Initial) C. | ement For: 2016 Primary General | | Amount of Each Disbursement this Period 1000.00 Date of Disbursement |
| Howe Purpose of Disbursement contribution Candidate Name Marlin A. Stutzman Office Sought: House Senate President State: IN District: Full Name (Last, First, Middle Initial) C. Mailing Address City | ement For: 2016 Primary General Other (specify) | | Amount of Each Disbursement this Period 1000.00 Date of Disbursement |
| Howe Purpose of Disbursement contribution Candidate Name Marlin A. Stutzman Office Sought: House Senate President State: IN District: Full Name (Last, First, Middle Initial) C. Mailing Address | ement For: 2016 Primary General Other (specify) | | Amount of Each Disbursement this Period 1000.00 Date of Disbursement |
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| Howe Purpose of Disbursement contribution Candidate Name Marlin A. Stutzman Office Sought: House Senate President State: IN District: Full Name (Last, First, Middle Initial) C. Mailing Address City Purpose of Disbursement Candidate Name Office Sought: House Disburse | ement For: 2016 Primary General Other (specify) State Zip Code | Type Category/ | Amount of Each Disbursement this Period 1000.00 Date of Disbursement |
| Howe Purpose of Disbursement contribution Candidate Name Marlin A. Stutzman Office Sought: House Senate President State: IN District: Full Name (Last, First, Middle Initial) C. Mailing Address City Purpose of Disbursement Candidate Name Office Sought: House Senate Disburse Disburse Senate | ement For: 2016 Primary General Other (specify) State Zip Code ement For: Primary General | Type Category/ | Amount of Each Disbursement this Period 1000.00 Date of Disbursement |
| Howe Purpose of Disbursement contribution Candidate Name Marlin A. Stutzman Office Sought: House Senate President State: IN District: Full Name (Last, First, Middle Initial) C. Mailing Address City Purpose of Disbursement Candidate Name Office Sought: House Senate President Disburse Senate President | ement For: 2016 Primary General Other (specify) State Zip Code | Type Category/ | Amount of Each Disbursement this Period 1000.00 Date of Disbursement |
| Howe Purpose of Disbursement contribution Candidate Name Marlin A. Stutzman Office Sought: House Senate President State: IN District: Full Name (Last, First, Middle Initial) C. Mailing Address City Purpose of Disbursement Candidate Name Office Sought: House Senate Disburse Disburse Senate | ement For: 2016 Primary General Other (specify) State Zip Code ement For: Primary General | Type Category/ | Amount of Each Disbursement this Period 1000.00 Date of Disbursement |
| Howe Purpose of Disbursement contribution Candidate Name Marlin A. Stutzman Office Sought: House Senate President State: IN District: Full Name (Last, First, Middle Initial) C. Mailing Address City Purpose of Disbursement Candidate Name Office Sought: House Senate President State: District: | ement For: 2016 Primary General Other (specify) State Zip Code ement For: Primary General Other (specify) Other (specify) | Category/ Type | Amount of Each Disbursement this Period 1000.00 Date of Disbursement M M / D D / Y Y Y Y Y Amount of Each Disbursement this Period |
| Howe Purpose of Disbursement contribution Candidate Name Marlin A. Stutzman Office Sought: House Senate President State: IN District: Full Name (Last, First, Middle Initial) C. Mailing Address City Purpose of Disbursement Candidate Name Office Sought: House Senate President Disburse Senate President | ement For: 2016 Primary General Other (specify) State Zip Code ement For: Primary General Other (specify) Other (specify) | Category/ Type | Amount of Each Disbursement this Period 1000.00 Date of Disbursement |
| Howe Purpose of Disbursement contribution Candidate Name Marlin A. Stutzman Office Sought: House Senate President State: IN District: Full Name (Last, First, Middle Initial) C. Mailing Address City Purpose of Disbursement Candidate Name Office Sought: House Senate President State: District: | ement For: 2016 Primary General Other (specify) State Zip Code ement For: Primary General Other (specify) Other (specify) | Category/ Type | Amount of Each Disbursement this Period 1000.00 Date of Disbursement M M / D D / Y Y Y Y Y Amount of Each Disbursement this Period |